2010-2011 School Year
Indiana State Department of Health (ISDH)
School Immunization Requirements
Quick Reference Guide

Vaccination	3-5 Year olds	K	1	2	3	4	5	6	7	8	9	10	11	12
DTaP/DTP/DT/Td*	4	5	5	5	5	5	5	5	5	5	5	5	5	5
Polio**	3	**4*** **	4	4	4	4	4	4	4	4	4	4	4	4
Measles	1	2	2	2	2	2	2	2	2	2	2	2	2	2
Mumps	1	2	2	2	2	2	2	2	2	2	2	2	2	2
Rubella	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Hepatitis B~	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Varicella	**2**	**2**	1	1	1	1	1	**2**	**2**	**2**	**2**	**2**	**2**	**2**
Tdap	-	-	-	-	-	-	-	**1**	**1**	**1**	**1**	**1**	**1**	**1**
MCV4	-	-	-	-	-	-	-	**1**	**1**	**1**	**1**	**1**	**1**	**1**